



# KANSAS DEPARTMENT OF CORRECTIONS

	<b>INTERNAL MANAGEMENT POLICY AND PROCEDURE</b>	SECTION NUMBER	PAGE NUMBER
		11-126A	1 of 8
		DECISION MAKING: House Arrest Program	
<b>Approved By:</b>  Secretary of Corrections		Original Date Issued:	02-15-16
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		<b>CURRENT VERSION EFFECTIVE:</b>	02-15-16

<b>APPLICABILITY:</b>	<input checked="" type="checkbox"/> ADULT Operations Only	<input type="checkbox"/> JUVENILE Operations Only	<input type="checkbox"/> DEPARTMENT-WIDE
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## POLICY STATEMENT

Pursuant to K.S.A. 21-6609, the Secretary of Corrections may implement a house arrest program for offenders in his or her custody. Offenders who meet the criteria set forth in this policy may be transferred to house arrest to promote offender management, transitional and release planning, and risk reduction. Recommendations for placement of offenders on house arrest shall be made based upon each individual offender's degree of risk to the community, and without regard to an offender's race, national origin, gender, or religion. Placement shall be approved by the Secretary of Corrections or designee. Offenders assigned to house arrest shall be considered inmates. House arrest sanctions may include, but are not limited to, rehabilitative restitution in money or in kind, curfew, community service, deprivation of nonessential activities or privileges, other appropriate restraints on the offender's liberty, or revocation of house arrest status and return to prison. Offenders absconding house arrest status shall be placed on escape status.

## DEFINITIONS

**House Arrest:** an individualized program in which the freedom of an offender is restricted within the community, home or non-institutional residential placement and specific sanctions are imposed and enforced.

**Approved Destination:** a specific physical address that has been approved by the parole officer and is included in the approved itinerary. May include employers, service providers, places of worship, and retail stores to which the offender may need to travel in the course of his or her day.

## PROCEDURES

### **I. House Arrest Selection Criteria:**

- A. In order to be considered for transfer to House Arrest, offenders must meet the following criteria:
  1. The offender cannot be serving any indeterminate or off-grid sentence.
  2. The offender cannot be managed as a sex offender.
  3. The offender cannot have a history of absconding on post incarceration supervision as an adult.
  4. The offender cannot have disabled or attempted to disable the monitoring device while on electronic monitoring.

5. The offender's most recent termination from a recommended program cannot be "refusal to enter," "refusal to participate" or terminated due to "disciplinary/poor performance":
6. The offender must have no disciplinary convictions for any of the following as defined in attachment "D" of the KDOC Custody Classification Manual:
  - a. An R1 rule infraction in the past 3 years,
  - b. An R2 rule infraction in the past six months, or
  - c. Two or more R3 and/or R4 rule infractions within the past 6 months.
7. The offender must have a KDOC facility assessed LSIR score of 23 or lower.
  - a. If an offender is 24 or higher on the latest RDU admission LSIR, unless an updated LSIR was completed specifically for purposes of determining what programming should be provided, s/he is not eligible for house arrest consideration.
  - b. The Secretary or designee may make an exception on a case-by-case basis for an offender above 24, provided the offender has successfully completed recommended programming in a KDOC facility that addresses elevated risk/need as identified by the LSIR or other approved risk/needs assessment instrument.
8. The offender must be classified minimum custody for at least 30 continuous days prior to placement on house arrest.
9. The offender must be 120 days or less from his or her projected release date.
10. The offender must be free of any felony and/or misdemeanor detainers.
11. The offender must have an approved residence plan to which he or she can release.
  - a. If the offender's minor children will be in the home, the offender must have completed a parenting program approved by the KDOC, and there must not be an order in place prohibiting the offender's contact with the minor children.
12. The offender must have access to funds in a sufficient amount to cover the cost of medical and dental care, daily living expenses, rent deposit and utilities if applicable, and administrative supervision fees for the first 30 days on house arrest status.
13. The offender must have a plan for meeting his/her financial needs beyond 30 days, whether it is a plan for employment/job search, a plan to access benefits for which s/he is eligible, or some other plan indicating a realistic means of meeting financial obligations beyond 30 days.

## **II. House Arrest Referral Procedures**

- A. Any offender who meets the requirements of Section I.A. may submit an Application for Placement on House Arrest, using the "Application for Placement on House Arrest" (Attachment A).
- B. An Application for Placement on House Arrest must be submitted at least ninety (90) days prior to the date of transfer to house arrest.
- C. The date of transfer to house arrest shall be no more than ninety (90) days prior to the offender's release date.

- D. An Application for Placement on House Arrest shall be processed as follows:
1. The application shall be submitted by the Unit Team Counselor to the Unit Team Manager for initial review. The UTM shall ensure that the application complies with the provisions of this policy. If it does, the UTM shall submit the application to the Classification Administrator for review.
  2. The Classification Administrator shall determine whether the application complies with this policy and make an initial determination as to the suitability of the offender for placement on house arrest. If the Classification Administrator concludes that the application should proceed, the Classification Administrator shall send it to the facility R3 Coordinator for processing of the proposed residence plan for approval or disapproval by parole. The residence plan shall be submitted within one week, and parole shall respond within fourteen (14) calendar days of submission.
  3. Simultaneously with submitting the residence plan to parole for approval or disapproval, the R3 Coordinator or designee shall contact Victim Services to obtain input about any victim issue. Any identified issue shall be reviewed by the R3 Coordinator with the Classification Administrator to determine whether the application should proceed, and if so, whether any special condition regarding any victim issue should be recommended as part of the application.
  4. The information provided by Victim Services shall not be provided to any party outside of the R3 Coordinator, the Classification Administrator, and the Deputy Secretary of Facility Management and his/her designee without approval from the Victim Services Director.
  5. If a residence plan is approved, the Classification Administrator shall submit the application to the Warden or designee for review. At the time of submission, the Classification Administrator shall include any recommended special conditions, above and beyond those set out in this policy, upon which the offender should be placed on house arrest.
  6. If the Warden or designee concludes that the application complies with this policy, and the offender is a suitable candidate for consideration, the Warden shall forward the application for consideration to the Deputy Secretary of Facilities Management or designee for review.
  7. If the Deputy Secretary of Facilities Management or designee concludes that the application complies with this policy, and the offender is a suitable candidate, the application shall be forwarded to the Secretary of Corrections with a recommendation for approval.
  8. The final decision to grant or deny the application shall rest with the Secretary of Corrections.
- E. If the application is approved, the offender shall be required to complete and sign the "Conditions Of House Arrest" (Attachment B).
1. Offenders refusing to accept the conditions of house arrest shall not be transferred to house arrest.
- F. If the application is denied, the offender shall be notified in writing, using the "Notice of Denial of Application for Placement on House Arrest" (Attachment C).
1. The notice of denial shall not include any information provided by Victim Services.
  2. Parole Office will be notified of the denial.
- G. Any decision to deny the application at any stage is final and not subject to appeal.

**III. Release to Community if an Application is Approved**

- A. The release checklist shall be initiated in accordance with IMPP 11-121.
- B. The following notifications shall be made by facility staff:
  - 1. Sheriff and district or county attorney of the county in which the offender is to be placed under house arrest;
  - 2. Chief Law enforcement officer of any incorporated city or town in which the offender is to be placed under house arrest;
  - 3. Office of Victim Services, no less than seven (7) days prior to offender's transfer to house arrest; and
  - 4. Notification to parole staff regarding approval for house arrest transfer.
    - a. When approval has been granted by the Deputy Secretary of Facility Management to transfer an offender to house arrest, the classification administrator or designee shall request reporting instructions from the parole officer.
    - b. On the date of the offender's transfer to house arrest, parole staff shall be notified of the transfer.
- C. OMIS Movement codes for transfer to house arrest shall be entered by facility records staff.
- D. The offender shall be given his/her Conditions of House Arrest, using the previously signed "Conditions of House Arrest" (Attachment B), prior to his/her transfer to house arrest.

**IV. Supervision**

- A. As a condition of house arrest the offender shall consent to be monitored by a home telephone verification procedure.
- B. House Arrest offenders will meet in person with the parole officer once per month, unless documented case management needs or issues exist that indicate a need for additional supervision or support services.
- C. Supervision services provided shall include:
  - 1. Review and approval of the written itineraries (Attachment D) to identify locations and times when offenders may be away from their residence.
    - a. Approved destinations may include but are not limited to: family reintegration meetings, parent-teacher conferences & other parenting related activities, medical appointments, dental appointments, employment, employment search, and shopping for food and necessities.
    - b. Verbal changes to the written itinerary may be authorized by the parole officer, as needed.
  - 2. Urinalysis testing in accordance with IMPP 14-112A.
  - 3. Employer notification in accordance with IMPP 14-117A and employment verification no less than once per month.
  - 4. Collateral contacts no less than once per month.

5. Supervision fees will be charged, using fee code A, in accordance with IMPP 14-107A.
  6. Response to violations per section V. and in accordance with IMPP 14-137.
- D. The supervision officer shall provide information needed for good time awards to the designated facility staff for approval and entry into OMIS.

**V. Responding to Violations**

- A. Parole officers shall respond to all violations of house arrest conditions. When responding to violations, the offender's risk to public safety shall be considered.
1. When the parole officer has determined that a violation has occurred, a response shall be initiated immediately.
  2. If there is a risk to public safety or potential for escape/absconding, the offender shall be placed into local detention to await the outcome of the violation investigation.
  3. An offender is considered to be an escapee when one or more of the following occurs:
    - a. Violations of written itineraries that cannot be resolved within two (2) hours;
    - b. The offender has moved from his or her approved residence without permission;
    - c. The offender fails to report, and the parole officer cannot contact the offender within two (2) hours; or
    - d. The parole officer receives reliable information that the offender has left the area.
- B. Return to Correctional Facility
1. When violations occur that are determined to be severe enough to warrant return to a correctional facility, parole staff shall:
    - a. Issue an Order to Arrest and Detain; and
    - b. Notify local EAI or local law enforcement and arrange for the offender to be taken into custody and transported to the local detention center/jail.
  2. After the offender has been taken into custody and secured at a local jail and/or detention facility, parole staff shall:
    - a. Complete OMIS movement codes to indicate that the offender is in local detention;
    - b. Issue a violation report detailing the violations; and
    - c. Present the offender with a Statement of Charges and a copy of the Violation report.
  3. An offender shall have the right to have a preliminary hearing or waive the preliminary hearing.
    - a. If probable cause is established at a preliminary hearing, Officers shall create a transport memo to notify facilities that the offender is available for return to the facility.

- b. If probable cause is established, a completed revocation packet shall be submitted to the Prisoner Review Board (PRB) in accordance with IMPP 14-141A.
- 4. The offender shall have a final hearing before the Prisoner Review Board (PRB).
  - a. The offender shall have the right to waive the final hearing before the PRB.
- 5. Offenders who violate one or more conditions of supervision are also subject to discipline pursuant to K.A.R. 44-12-1002, Violation of published internal management policies and procedures or published orders, with reference to this IMPP, and violation of any condition of supervision shall be a Class I offense.
  - a. Upon the offender's waiver of the final hearing before the PRB and return to a facility, or upon final revocation of the offender's house arrest status by the PRB, the offender's assigned Unit Team Manager may choose to initiate the disciplinary process and proceed to issue a Class I disciplinary report and have it served upon the offender.
    - (1) In the event of final revocation based upon a finding of violation of one or more conditions of house arrest by the PRB, the written findings of the PRB shall also constitute a prima facie finding of violation of K.A.R. 44-12-1002 with reference to this IMPP, which the offender may attempt to rebut during any disciplinary hearing incident to the charge.

## **VI. Escape Procedures**

- A. Once an escape has been declared, staff will follow the steps outlined in "Escape Procedures" (Attachment E).
- B. Once an escape has been declared, the Parole Officer shall notify the Winfield Correctional Facility with the relevant information. This information will include:
  - 1. The date, time, and reason for the initial electronic alert if applicable;
  - 2. The date, times, and locations checked by the Parole Officer before declaring the escape; and
  - 3. Any information obtained that may be germane to the escape.
- C. Staff at WCF shall initiate the following escape procedures upon notification of the House Arrest escape:
  - 1. An NCIC entry shall be initiated;
  - 2. Facility EAI Special Agents will be notified; and
  - 3. An escape flier shall be prepared and posted on the Internet.
- D. Once the escape plan has been initiated, WCF Special Agents shall:
  - 1. Ensure that an escape warrant has been issued;
  - 2. Gather basic intelligence information that may assist in locating the escapee; and
  - 3. Contact the KDOC EAI Director for transfer of the case to another facility or field office as determined by location.

- E. During normal duty hours, the Parole Officer who declared the escape shall be copied on all developments in the case. After normal duty hours, the Parole Duty Officer shall be advised of case developments.

## **VII. Offenders Completing House Arrest**

- A. When an offender reaches his or her sentence discharge date while on house arrest:
  - 1. Facility staff shall follow the process for offenders discharging their sentence while incarcerated.
  - 2. The discharge certificate shall be forwarded to the supervising parole officer.
  - 3. The supervising parole office shall submit goodtime awards to the facility for approval and entry into OMIS.
  - 4. Facility staff shall complete the appropriate OMIS movement records.
- B. When an offender reaches his or her release date while on house arrest:
  - 1. Facility staff shall follow the process for offenders releasing to the community.
  - 2. The release certificate shall be forwarded to the supervising parole officer to obtain the offender's signature.
  - 3. The supervising parole office shall submit final goodtime awards to the facility for approval and entry into OMIS.
  - 4. Facility staff shall complete the appropriate OMIS release movement records.
  - 5. Facility staff shall activate the post release good time log if applicable.

**NOTE:** The policy and procedures set forth herein are intended to establish directives and guidelines for staff and offenders and those entities who are contractually bound to adhere to them. They are not intended to establish State created liberty interests for employees or offenders, or an independent duty owed by the Department of Corrections to employees, offenders, or third parties. Similarly, those references to the standards of various accrediting entities as may be contained within this document are included solely to manifest the commonality of purpose and direction as shared by the content of the document and the content of the referenced standards. Any such references within this document neither imply accredited status by a departmental facility or organizational unit, nor indicate compliance with the standards so cited. The policy and procedures contained within this document are intended to be compliant with all applicable statutes and/or regulatory requirements of the Federal Government and the state of Kansas. This policy and procedure is not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

### **REPORTS REQUIRED**

None.

### **REFERENCES**

K.S.A. 21-6609  
K.A.R. 44-12-1002  
IMPP 11-113, 11-121, 14-107A, 14-112A, 14-117A, 14-137, 14-139A, 14-141A

**ATTACHMENTS**

<b>Attachment</b>	<b>Title of Attachment</b>	<b>Page Total</b>
A	Application For Placement On House Arrest	3 page(s)
B	Conditions of House Arrest	2 page(s)
C	Notice Of Denial Of Application For Placement On House Arrest	1 page(s)
D	House Arrest Weekly Itinerary	2 page(s)
E	Escape Procedures	1 page(s)

**APPLICATION FOR PLACEMENT ON HOUSE ARREST**

offender Name & #: \_\_\_\_\_ Date: \_\_\_\_\_

Unit Team Counselor Name & Phone #: \_\_\_\_\_

1. What is the offender's release date (mandatory or released by Prisoner Review Board)? \_\_\_\_/\_\_\_\_/\_\_\_\_

2. Will the offender be 120 days or less from his/her release date when placed on house arrest? ☐ Yes ☐ No  
***If not, not eligible to proceed.***

3. What is the proposed date for placing the offender on house arrest? \_\_\_\_/\_\_\_\_/\_\_\_\_

4. Is the offender serving a sentence that includes a conviction for an indeterminate or off-grid crime??  
☐ Yes ☐ No?

***If so, not eligible to proceed.***

5. What is the offender's current conviction & criminal history?

6. Has the offender been passed by the Prisoner Review Board within the past six months? ☐ Yes ☐ No  
***If so, not eligible to proceed.***

7. Is the offender managed as a sex offender? ☐ Yes ☐ No  
***If so, not eligible to proceed.***

8. Has the offender absconded from post incarceration supervision as an adult or disabled a GPS monitoring device while on electronic monitoring as an adult, at any time? ☐ Yes ☐ No  
***If so, not eligible to proceed.***

9. Has the offender been terminated from any of the following recommended programs, with "refusal to enter," "refusal to participate," or "terminated due to disciplinary/poor performance" as the most recent termination?

- |    |                             |                              |                             |
|----|-----------------------------|------------------------------|-----------------------------|
| a. | Sex Offender Treatment      | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. | Substance Abuse Treatment   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. | Vocational Training         | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| d. | Education (Literacy or GED) | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| e. | Pre-Release Reintegration   | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| f. | Work Release                | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

10. What programs has the offender successfully completed in the latest incarceration?

11. Has the offender been convicted of any of the following as defined in attachment "D" of the KDOC Custody Classification Manual?

- |    |  |                              |                             |
|----|--|------------------------------|-----------------------------|
| a. | An R1 rule infraction in the past 3 years                          | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| b. | An R2 rule infraction in the past six months                       | <input type="checkbox"/> Yes | <input type="checkbox"/> No |
| c. | Two or more R3 and/or R4 rule infractions within the past 6 months | <input type="checkbox"/> Yes | <input type="checkbox"/> No |

***If so, not eligible to proceed.***

12. What is the offender's DR history in the latest conviction?

13. What is the offender's KDOC facility LSIR score? \_\_\_\_\_

NOTE: If no KDOC facility LSIR score, an LSIR must be completed as part of this application.

14. Will the offender be classified minimum custody for at least 30 continuous days prior to placement on house arrest?  
☐ Yes ☐ No  
**If not, not eligible to proceed.**
- a. Current custody classification \_\_\_\_\_  
b. Is this application dependent upon a custody exception. ☐ Yes ☐ No
15. Does the offender have any felony or misdemeanor detainers pending? ☐ Yes ☐ No  
**If so, not eligible to proceed.**
16. Proposed residence plan? **An approved residence plan is mandatory to be eligible to proceed.**
17. Does the offender have minor children? ☐ Yes ☐ No  
a. Are they authorized contact with their minor children? ☐ Yes ☐ No  
b. Have they completed a KDOC approved Parenting Program? ☐ Yes ☐ No
18. Proposed plan to meet financial obligations:
- a. Does the offender have savings in hand sufficient to satisfy the first thirty (30) days of financial obligations, including the cost of medical and dental care, daily living expenses, rent deposit and utilities if applicable, electronic monitoring and administrative supervision fees for the first 30 days on house arrest status?  
☐ Yes ☐ No  
**If not, not eligible to proceed.**
- b. What is the offender's plan to meet financial obligations beyond the first thirty (30) days, including all those named above, plus any restitution, child support, court costs, driver's license/ID fees, living expenses, and/or other financial obligations?
19. Why does the offender believe s/he is a good candidate for house arrest?
20. Why does the Unit Team Counselor believe the offender is a good candidate for house arrest?

I, \_\_\_\_\_, #\_\_\_\_\_, make the above application for placement on house arrest. I have read the "Conditions of House Arrest," and agree to follow those conditions, as well as any special conditions imposed, if my application for placement on house arrest is granted.

_____	_____	_____	_____
Date	offender Signature	Date	Signature of Unit Team Counselor, witnessing offender signature

**Processing of Application for Placement on House Arrest**

- Review by Unit Team Manager (state name and contact number):

\_\_\_\_\_ Approved \_\_\_\_\_ Disapproved      Date \_\_\_\_\_ Signature \_\_\_\_\_

- Review by Classification Administrator (state name and contact number):

\_\_\_\_\_ Approved \_\_\_\_\_ Disapproved      Date \_\_\_\_\_ Signature \_\_\_\_\_

- Review by R3 Coordinator (state name and contact number):

\_\_\_\_\_ Residence plan submitted and either approved or disapproved:

\_\_\_\_\_ Application submitted to Victim Services; feedback:

\_\_\_\_\_ Any recommended special conditions, after review with Classification Administrator?

Date \_\_\_\_\_ Signature \_\_\_\_\_

- Review by Warden or designee (state name and contact number):

\_\_\_\_\_ Approved \_\_\_\_\_ Disapproved      Date \_\_\_\_\_ Signature \_\_\_\_\_

- Review by Deputy Secretary of Facilities Management or designee (state name and contact number):

\_\_\_\_\_ Approved \_\_\_\_\_ Disapproved      Date \_\_\_\_\_ Signature \_\_\_\_\_

- Review by Secretary of Corrections:

\_\_\_\_\_ Approved \_\_\_\_\_ Disapproved      Date \_\_\_\_\_ Signature \_\_\_\_\_

### **CONDITIONS OF HOUSE ARREST**

You have been approved for placement on house arrest, as of \_\_\_\_\_ (date). You will be under the supervision of a parole officer, and your placement and continued status on house arrest is subject to these conditions, to which you must agree in writing below in order to be placed on house arrest, and with which you must comply to continue to be on house arrest status. **Your failure to agree to and abide by these conditions will subject your status on house arrest to being denied or revoked.**

- A. Reporting, travel, residence and employment:** Upon release from the institution, I agree to report as directed to my assigned parole officer and follow his/her instructions in reporting on a regular basis and to continuously maintain my assigned and approved residence and employment. If it becomes necessary that I change either residence or employment, I will obtain advance permission from my parole officer. Travel to and from my approved destinations shall be by the most direct route between the approved destination and my residence. I consent to be monitored by a home telephone verification procedure. I will not leave the state of Kansas.
- B. Laws:** I shall obey all federal and state laws and municipal and county ordinances, including the Kansas Offender Registration Act and the DNA Collections Act. I shall notify my parole officer at the earliest opportunity if I have law enforcement contact for any reason.
- C. Weapons:** I will not own, possess, constructively possess, purchase, receive, sell or transport any firearms, ammunition or explosive device, or any device designed to expel or hurl a projectile capable of causing injury to persons or property, or any weapon prohibited by law.
- D. Personal Conduct:** I will not engage in assaultive activities, violence, or threats of violence of any kind.
- E. Narcotics/Alcohol:** I will not possess, use, or traffic in any controlled substance, narcotics or other drugs as defined by law, except as prescribed to me by a licensed medical practitioner. I will not consume any mind-altering substance, including, but not limited to, alcoholic beverages, wine, beer, glue, or paint. I agree and consent to submit to a blood, Breathalyzer and/or urine test at the direction of the parole officer. I will not tamper with, falsify or dilute such a test.
- F. Association:** I will not associate with persons engaged in illegal activity and will obtain prior written permission from the parole officer and institutional director to visit or correspond with offenders of any correctional institution.
- G. Employment:** I agree to secure and maintain reasonable, steady employment within 45 days of my release from prison or residential treatment unless excused for medical reasons or an extension of time is given by my parole officer. I agree to notify my employer of my current and prior (non-expunged) adult felony convictions and status as an offender.
- H. Costs:** I agree to pay restitution, court costs, supervision fees, and other costs as directed by my parole officer.
- I. Treatment/Counseling:** I agree to comply with my relapse prevention plan and the recommendations of any treatment or counseling or assessment program which I have completed during my incarceration or while under supervision. I agree to follow any directives given to me by my parole officer regarding evaluations, placement and/or referrals. I agree to submit to polygraph examinations as directed by my parole officer and/ or treatment provider.

- J. Victim:** I agree to have no contact with the victim(s) in my case(s) or the victim's family by any means including, but not limited to, in person, by phone, via computer, in writing, or through a third party without the advance permission of my parole officer.
- K. Search:** I agree to submit to search by parole officer(s) of my person, residence, and any other property under my control.
- L. Law Enforcement Contact:** I agree that if a law enforcement official presents him/herself at my residence where I am on house arrest, I will respond to the door and truthfully answer any questions posed to me by the law enforcement officer.
- M. Special Conditions:** I agree to abide by any special conditions(s) set forth below, as well as to comply with instructions which may be given or conditions imposed by my parole officer from time to time as may be governed by the special requirements of my individual situation.
- N. House Guests:** I agree not to have more than two (2) persons at my residence where I am on house arrest, other than myself and any actual resident, at any time without the advance permission of my parole officer.

**Special Conditions:**

**Reporting Instructions:**

\_\_\_\_\_  
Date                      Signature of offender

\_\_\_\_\_  
Print Name & Number of offender

\_\_\_\_\_  
Date                      Signature of KDOC staff witnessing signature

\_\_\_\_\_  
Print Name & Position & Contact # of person witnessing

**NOTICE OF DENIAL OF APPLICATION FOR PLACEMENT ON HOUSE ARREST**

To: Offender \_\_\_\_\_ # \_\_\_\_\_

Date:

From: Classification Administrator

Subject: Application for Placement on House Arrest

You are hereby notified that your Application for Placement on House Arrest has been **DENIED**.

You are further notified that this decision is final and is not subject to appeal.

You may be eligible to submit a new application at some point in the future, consistent with KDOC policy and Kansas law. See your assigned correctional counselor or Unit Team Manager when you again believe that you are eligible.

cc Master File  
Parole Office

**HOUSE ARREST WEEKLY ITINERARY**

Name and Number \_\_\_\_\_

**Monday (date)** \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

**Tuesday (date)** \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

**Wednesday (date)** \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

**Thursday (date)** \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

**Friday (date)** \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

**Saturday (date)** \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
 Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
 Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

**Sunday (date)** \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
 Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

Destination: \_\_\_\_\_ Reason: \_\_\_\_\_  
 Leave and Return Times: \_\_\_\_\_ Transportation Method: \_\_\_\_\_

Offender Signature	Date
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Approved By	Date
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Comments:

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### **Escape Procedures**

- A. Once an escape has been declared, staff will follow the steps outlined below.
- B. Once an escape has been declared, the Parole Officer shall notify the Winfield Correctional Facility with the relevant information. This information will include:
  - 1. The date, time, and reason for the violation of written itinerary, if applicable;
  - 2. The date, times, and locations checked by the Parole Officer before declaring the escape; and
  - 3. Any information obtained that may be germane to the escape.
- C. Staff at WCF shall initiate the escape procedure upon notification of the House Arrest escape.
  - 1. An NCIC entry shall be initiated.
  - 2. Facility EAI Special Agents will be notified.
  - 3. An escape flier will be prepared and posted on the Internet.
- D. Once the escape plan has been initiated, WCF Special Agents shall:
  - 1. Ensure that an escape warrant has been issued;
  - 2. Gather basic intelligence information that may assist in locating the escapee; and
  - 3. Contact the KDOC EAI Director for transfer of the case to another facility or field office as determined by location.
- E. During normal duty hours, the Parole Officer who declared the escape shall be copied on all developments in the case. After normal duty hours, the Parole Duty Officer shall be advised of case developments.